

STATE OF NEVADA
DEPARTMENT OF EDUCATION
Office of Teacher Licensing

APPLICATION FOR RENEWAL OF NEVADA LICENSE

APPLICATION PROCEDURES and GENERAL REQUIREMENTS

To apply for renewal of a Nevada license for educational personnel in the State of Nevada, an applicant must submit all of the following documents:

- ☐ Completed and signed Application for Renewal of Nevada License.
- ☐ Credits required for renewal of a license must be earned from a regionally accredited college/university (on an official transcript); through PDE/in-service or other pre-approved CEU providers (copies of certificate(s) required); or as otherwise allowed by regulation. Photocopies and faxes of transcripts **will not** be accepted. Hand carried transcripts are acceptable as long as they are official. Transcripts are considered official if they bear the school seal and registrar's signature.
- ☐ Application fee of \$80.00 to renew a license. **Check or money order only.** Please make check/money order payable to the Nevada Department of Education. Cash can not be accepted.
- ☐ Child Support Disclosure form completed. (Note: You must complete this form even if you are not required to pay child support)

Applications can be mailed to the appropriate Teaching Licensing Office:

Northern Office
700 East Fifth Street, Suite 105
Carson City, Nevada 89701-5096
Phone (775) 687-9115

Southern Office
1820 E. Sahara, Suite 205
Las Vegas, Nevada 89104-3746
Phone (702) 486-6458

Applications for renewal can be submitted 9 months prior to the expiration of the license. The application fee is non-refundable.

Incomplete applications will be returned to applicant.

TYPES OF LICENSES

Nevada licenses are issued for a specified number of years as indicated below to a person who submits at the time of renewal, the appropriate paperwork and documentation to the department.

- ⇒ A license is valid for 5 years with a bachelor's degree, or for those who are issued a Business & Industry or substitute teaching license.
- ⇒ A license is valid for 6 years with the submission of a master's degree and 3 years of verified teaching experience.
- ⇒ A license is valid for 8 years with the submission of a specialist's degree and 3 years of verified teaching experience.
- ⇒ A license is valid for 10 years with the submission of a doctoral degree and 3 years of verified teaching experience. Any license is renewable upon submission of required documentation by expiration date.

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RENEWAL APPLICATION

Social Security Number _____ Date of Birth _____

Last Name _____ First Name _____ MI _____

Mailing

Address _____
Street City State Zip

Phone Number (____) _____

If you are not going to renew all the licenses/endorsements that currently appear on your license, which ones are to be omitted? _____
Specify license/endorsements to be omitted

What is your current teaching assignment?

County: _____ School: _____

Subject Area (s): _____ Grade level: _ _____

Highest degree earned? _____ Date Conferred: _____

Institution where highest degree was earned?

Type of credits you will be using to renew your license? If using college/university credit, please list institutions attended.

Signature of Applicant

Date

Nevada Department of Education OFFICE OF TEACHER LICENSING

Important Notice

PROFESSIONAL LICENSES SUBJECT TO DENIAL OR RESTRICTION FOR BACK CHILD SUPPORT

Professional or occupational licenses, certificates or permits may be denied or restricted if back child support is owed by the person holding the license. The License for Educational Personnel issued by the Nevada Department of Education is subject to this new requirement mandated by the Federal Government of all states, including Nevada.

Under the new procedure a District Attorney's Office or the Nevada Welfare Division will send a written notice to the person who:

1. Is past due in child support.
2. Fails to provide health coverage for a child; or
3. Fails to comply with a subpoena or warrant relating to a child support proceeding.

The notice will be sent by certified mail, restricted delivery, return receipt requested. The person has 30 days to satisfy the past due support or comply with an approved repayment plan, or provide health coverage, or comply with the subpoena or warrant. Or, the person may request a hearing challenging the finding that he owes back child support, has failed to provide health coverage, or is not complying with a subpoena or warrant in a child support proceeding.

If after a hearing is held the person is found to owe past child support, has failed to provide health coverage, or has refused to comply with a subpoena or warrant in a child support proceeding, the professional or occupational licensing agency will be notified by way of an "Order to Suspend". Upon receipt of the "Order to Suspend", the professional or occupational licensing agency must suspend or restrict the professional license as determined in the hearing. The agency issuing the professional or occupational license, certificate or permit shall reinstate the license after receiving information from the District Attorney's Office or Welfare Division that the person is in compliance with the child support requirements.

In addition, every application for a professional license must include a statement regarding the applicant's child support payment status. **If the applicant fails to answer the questions or sign that portion of the application, the person's application will not be processed.** If the applicant reports that he is not complying with a support order or approved repayment plan, then the applicant must contact the local District Attorney or the Welfare Division to arrange for payment of child support.

Nevada Department of Education TEACHER LICENSING

Important Notice

CHILD SUPPORT INFORMATION

Please mark the appropriate **response (Failure to make one of the three will result in denial of the application).**

☐

I am not subject to a court order for the support of a child.

☐

I am subject to a court order for the support of one or more children and am in compliance with the order or am in compliance with a plan approved by the District Attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order; or

☐

I am subject to a court order for the support of one or more children and **am not** in compliance with the order or a plan approved by the District Attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

Applicant's Social Security Number: _____

Signature of Applicant

Date